

A Comparative Study On Stammering And Dysfluent Speech

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Abstract:- Stammering and Dysfluent speech is synonyms speech disorder. This disorder occurs in people with different age group & different causative factors. Those people who are suffering with this disorder feel shy in Public meeting become nervous & can't perform his work freely. Some students even fail in their higher interviews. Homoeopathic medicines and speech therapy can cure speech disorder easily than any other mode of treatment.

Key words:- Stammering, Dysfluent speech, facial expression, Cerebral Palsy, Head Trauma

Introduction:

Stammering is a Speech disorder characterized by hesitation & repetition of word, or by mispronunciation or transposition of certain consonants. While Dysfluent speech is a speech disorder that can cause a person to repeat, interrupt or prolong sounds syllables, or words when trying to speak. In Dysfluent speech, you may know what you want to say but find it hard to get the words out. The words may seem to get stuck, or you may find yourself repeating them over and over. Dysfluent speech may find in people of all ages. People who has dysfluent speech may avoid certain words or situations which they know will cause them difficulty in speech.

Characteristics of stammering:-

Stammering is characterized by stoppage and disruptions in fluency. which interrupts the smooth flow and timing of speech. These stoppages may take the form of;

- 1- Repetitions of sounds, syllables or words
- 2- Prolongations of sounds so that words seem to be stretched out
- 3- Silent blocking of the airflow of speech when no sound is heard.
- 4- Speech may sound forced, tense or jerky. People who stammer may avoid certain words or situations which they know will cause them difficulty.

Stammering occurs in all parts of worlds across all culture, religions and socio economic group.

Prevalence Rate:- It occurs most often in children between the age of 2 to 5 year's. Male child become more stammer than girl child.

-:Some common myths :-

- Children who stutter are not as intelligent as other children.
- Parents are to blame for their child's stammer.
- Children who stammer may not speak in class, it is often assumed that they are shy and unconfident reaction of other people do affect their confidence.
- Nearly all children report a dramatic reduction in stammering when they sing, speak to an infant or a pet or read aloud with large group of students.

Etiology of stammering:-

There are six type of etiology found those affect normal speech i.e.;

- 1- Developmental Stammering:-** Developmental stuttering occurs in young children while they are still learning speech and language skill. It is the most common form of stuttering. In some stammering cases congenital factors may play a role. These may include physical trauma at or around birth including cerebral palsy, mental retardation, or stressful situations, such as the birth of a sibling, moving or sudden growth in linguistic ability.

- 2- **Neurogenic Stuttering:-** Neurogenic stuttering may occur after a stroke, head trauma or other type of brain injury. With Neurogenic stuttering, the brain has difficulty coordinating the different components involved in speaking because of signal problem between the brain nerves or muscles.
- 3- **Environmental Factors:-** A child who stammer may become more disfluent when increased demands are made of the person in speaking situation, when the person has high expectations of him or herself in certain situations, and with certain people (e.g. speaking on the telephone, at an interview) or when a specific response is needed (e.g. saying one's name, address or phone number, having to use particular words).
- 4- **Linguistic Factors:-** Children who stammer do so on words which carry information and when using complex words of several syllables. They tend to stammer more at the start of sentence.
- 5- **Physical Factors:-** Sometimes it is more difficult for children who stammer to speak fluently, for example when they are feeling ill, stressed, tired, excited or upset.
- 6- **Psychological Factors:-** Children who stammer may become more disfluent depending on their feeling about their speech their perception of themselves as effective communicators and others reaction to their stammering. Children who stammer are normally fluent when speaking in chorus, singing or whispering.

Presentation of stammering:-

Type of the stammering differs for each individual, the following features are more usual;

- 1- Repetition of whole words, e.g. "and, and, and, then I left"
- 2- Repetition of single sounds, e.g. "c-c-come h-h-here"
- 3- Prolonging of sound, e.g. "ssssssssssssometimes I go out"
- 4- Blocking of sounds, where the mouth is in position, but no sound comes out
- 5- Facial tension- in the muscles around eyes, nose, lips or neck
- 6- Extra body movements may occur as the child attempts to 'push' the word out; stamping the feet, shifting body position or tapping with the fingers.
- 7- Generally the flow of speech is interrupted and this may cause distress to the speaker and the listener.

Homoeopathic treatment:- MOUTH; speech stammering; acon, arg-n, **BELL**, bov, bufo, cann-i, *carb-s*, **CAUST**, *cupr*, euph, *lach*, mag-c, **MERC**, **NUX-V**, *phos*, plat, *sel*, spig, **STRAM**, *sulph*

Excitement; *agar*, *caust*

Exert himself a long time before he can utter a word; **STRAM**

Last words of the sentence; lyc

Vexation from; *caust*

MOUTH; speech; has to exert himself a long time before he can utter a word; **STRAM**

Repeats first syllable of a word three or four times; **spig**.

Stammering; **BELL**, **CAUST**, **CUPR**, **EUPH**, **KALI-BR**, **lac-c**, **LACH**, **MAGH-P**, **MERC**, **NUX-V**, **PHOS**, **PLAT**, **STRAM**, **SULPH**

- from childhood; caust.

- on letters S,B,T and W; **LACH**.

- sudden; **MAG-C**

- with abdominal ailments; spig.

Etiology of dysfluent speech:-

- If Dysfluent speech is acquired in adulthood through a specific like a stroke or brain injury. It is referred as neurogenic injury.
- Muscle weakness
- Damaged vocal cords
- Degenerative disease, such as Huntington's disease, Parkinson's disease
- Dementia
- Autism
- Down syndrome

Risk factors:-

- 1- Being male
- 2- Being born prematurely
- 3- Having low weight at birth
- 4- Having family history of speech disorders

Prevalence Rate:- It mostly occurs in adulthood .

Dysfluent speech may show in equal in male and female.

More than 70 % of all the speech dysfluent disorder are due to difficulty in articulation due to local lesion of the tongue, lip, mouth, ill fitting dentures

or any disruption of the neuromuscular pathway.

Presentation of symptoms in dysfluent speech:-

- 1- Tension in the face and shoulders
- 2- Lip tremors
- 3- Clenched fists
- 4- Sudden head movements
- 5- Articulation due local lesion of the tongue, lip, mouth, ill fitting dentures or any disruption of the neuromuscular pathways.

Some examples are there like person says *wed* for *red*

Person says *back* for *black*

Person says *chat* for *cat*.

Homoeopathic Treatment:-

Rubrics related to articulation disorder as defined on some of the reference.

Repertories like C.B.Knerr's Repertory, Hering's guiding symptoms of Our Materia Medica and Frederik Schroyens; synthesis, Repertorium homoeopathicum syntheticum, Kent repertory etc.

(Kr) MIND; talking inarticulate, like abeats more than a human being; verat

In facial neuralgia; verat

(S) MIND; speech; inarticulate: aesc.g, both, bov, cann s, caust, ign.

(Kr) MIND; talking; babbling (typhus); STRAM

(S) MIND; talking; babbling; *hyos, stram*

(Kr) MIND; talking; distorted; cupr.s

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